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THE RISE AND FALL OF THE LICENSED
PHYSICIAN IN MASSACHUSETTS,
1781-1860.

THE PRESIDENT'S ADDRESS

AT THE NINTH ANNUAL MEETING OF THE ASSOCIATION OF AMERICAN
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BY

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OF BOSTON.



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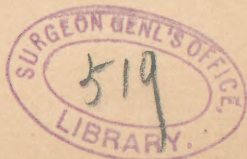
THE RISE AND FALL OF THE LICENSED PHYSICIAN IN MASSACHUSETTS, 1781-1860.

BY REGINALD H. FITZ, M.D.,
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GENTLEMEN: In calling to order the Ninth Annual Meeting of our Association I desire to express the highest appreciation for the honor you have bestowed upon me in appointing me to preside over your proceedings. To conduct the affairs of so aristocratic a democracy has been made a task so easy that the gift of persuasion or the knowledge of parliamentary law become wholly unnecessary qualifications. The one obligation which has weighed somewhat heavily is the thought of the opening address which is to prepare the way for such communications as you are to make for the advancement of scientific and practical medicine—all the more as my own attention has been particularly directed for the past few months toward a class of practitioners who have no idea of scientific medicine, and whose only thought of the practice of medicine is how much money can be made out of it. It may not be uninteresting to learn what men like yourselves, many years ago, did in order to discourage such persons—what they planned, what they accomplished, and why they failed. I will, therefore, ask your attention to the rise and fall of licensed physicians in Massachusetts, 1781-1860.

In the "Records of the Governor and Company of the Massachusetts Bay in New England" (1854, III., 153) is to be found the first legislation concerning the regulation of medical practice in Massachusetts. On the 3d of May, 1649, the General Court, held at Boston, voted as follows:

"Forasmuch as the lawe of God (Exod: 20; 13) allowes no man to touch the life or limme of any pson except in a judicyall way, bee it hereby



ordered and decreed, that no pson or psons whatsoever that are imployed about the bodyes of men, woemen, and children for preservation of life or health, as phisitions, chirurgians, midwives, or others, shall presume to exercise or putt forth any act contrary to the knowne rules of arte, nor exercise any force, violence, or cruelty vpon or towards the bodyes of any, whether young or old,—no, not in the most difficult and desperate cases—wth out the advice and consent of such as are skilfull in the same arte, if such may be had, or at least of the wisest and gravest then present, and consent of the patient or patients (if they be mentis compotes), much lesse contrary to such advice and consent, vpon such punishment as the nature of the fact may deserve; w^{ch} law is not intended to discourage any from a lawfull vse of their skill, but rather to encourage and direct them in the right vse thereof, and to inhibit and restrayne the presumptuous arrogance of such as through praefidence of their oune skill, or any other sinister respects, dare be bould to attempt to exercise any violence vpon or toward the bodies of young or old, to the prejudice or hazard of the life or limme of men, woemen, or children.”

Until the years immediately preceding the War of the Revolution there was no more stringent regulation of medical practice than this. But in 1760 the city of New York had found it necessary to regulate the practice of medicine within its limits on account of the abundance of quacks preying upon the community. Five years later the Medical School of the University of Pennsylvania was established, and in the following year the New Jersey Medical Society was founded. In still another year the Medical School of Columbia College began its career; and in 1771 the colony of New Jersey passed its act regulating the practice of medicine, to be followed in 1774 by the abortive attempt in Connecticut.

The years thus ripe in revolutionary ideas and acts produced their fruit in Massachusetts.

Although there were excellent physicians in the larger cities and towns of the Commonwealth, and several of them possessed medical degrees received in Europe, they were few and far between. Most practitioners had served merely a sort of apprenticeship to their seniors. There was no medical school in the State, and but two in the country, and these almost as remote as the leading schools of Europe at the present day. Anyone undertook the study of medicine in such manner as he saw fit, and entered his practice with as little preparation as he chose. A considerable number of wholly unqualified practitioners thus were to be found, a source of danger

to the community, a disgrace to the name of physician, and a cause of jealousy, contention, and distrust, among the members of the profession.¹

The example set by New Jersey and New York was one which demanded a speedy following, and thirty-one of the leading physicians of Massachusetts, sixteen being from towns outside of Boston, became incorporated as the Massachusetts Medical Society, "that a just discrimination should be made between such as are duly educated, and properly qualified for the duties of their profession, and those who may ignorantly and wickedly administer medicine whereby the health and lives of many valuable individuals may be endangered, or perhaps lost to the community."

That this purpose might be carried out, the President and Fellows of the Society or their appointees from its members were given "full power and authority to examine all candidates for the practice of physic and surgery, who shall offer themselves for examination, respecting their skill in their profession, and if upon such examination the said candidates shall be found skilled in their profession, and fitted for the practice of it, they shall receive the approbation of the Society in letters testimonial of such examination," etc. They were obliged, under penalty, to hold this examination, although candidates were not obliged to present themselves for approval.

The State thus did not prevent the practice of medicine by anyone, but it implied that the letters testimonial of the Society discriminated between the duly educated and properly qualified, and the ignorant and wicked. By the limitation of the maximum membership to seventy, admission to the fellowship became a proof of distinction which the better educated and higher-minded physicians were proud to attain. This number, furthermore, gave evidence of the comparatively few physicians in the State at that time who were considered worthy of this high distinction. Indeed, it repeatedly happened in the early life of the Society that it was impossible to secure the attendance of a sufficient number of Fellows to form a quorum to transact business.

Two years after the incorporation of the Medical Society the Medical School of Harvard College was established; and it was

¹ Proceedings of the Massachusetts Medical Society, 1831, 19.

feared that the power of Harvard College to examine medical students and grant degrees in medicine might interfere with the authority of the Society to examine candidates for practice and issue letters testimonial. According to the memorial of Dr. John Warren in 1811, this "would have produced the most unhappy effects, but for the repeal of an exceptionable article in that establishment, and the accommodating conduct of those who, at that time, were the guardians of science and the patrons of the healing art."¹

But doubts arose with reference to the duties and powers of the Society concerning the examination of candidates and its authority to demand and receive compensation for its services, and an act in addition to the act of incorporation was passed in 1789. It was therein made the duty of the Society, "in order more effectually to answer the designs of their institution, from time to time to describe and point out such a medical instruction, or education, as they shall judge requisite for candidates for the practice of physic and surgery, previous to their examination before them and they shall cause the same to be published in three newspapers in three different counties within this Commonwealth."

The Society continued to fail in its object to create a proper standard of medical qualifications. The population of the State rapidly increased, and the number of practitioners likewise. There was no sufficient inducement to lead physicians to apply for the approval of the Society; and in the first twenty years of its existence only some twenty candidates had received the testimonials in approval of their professional skill.² In the same period Harvard had conferred its medical degree upon thirty candidates.

Early in the present century Dr. John D. Treadwell, a young, learned, devoted and public-spirited physician of Salem, impressed with the inability of the Society to accomplish its aims, endeavored to improve its usefulness. An extensive correspondence was instituted among the members, and with the assistance of Mr. Sewell, afterward Chief Justice of the State, a bill was drafted, which, somewhat modified, was enacted in 1803.

The Massachusetts Medical Society, as it now exists, was then

¹ Dr. S. A. Green's Centennial Address, Med. Comm. Massachusetts Medical Society, 1875-81, xli. 639, 654.

² Dr. James Jackson's Speech at the Annual Dinner, 1856.

instituted; and its plan of organization became a model for other State societies. It was no longer a close corporation with a limited membership, but it was possible for every physician in the State to become a Fellow. It was only necessary that he should have been a student in medicine agreeably to the regulations of the Society, and pass a satisfactory examination before the censors, after which he received a license to become a practitioner of medicine or surgery; "and after three years of approved practice in medicine and surgery, and being of good moral character, and not otherwise," he became a member of the corporation by subscribing to the by-laws.

The medical graduates of Harvard University were made licentiates without passing an examination, since the right to confer degrees had been granted Harvard College long before the Massachusetts Medical Society was incorporated. "The only means of avoiding collision with that ancient and respectable institution was by the compromise which was adopted."¹

A duly licensed physician in Massachusetts in 1804 was required to give satisfactory evidence of the following qualifications before being admitted to examination for the license: Some acquaintance with Latin and Greek, and with the principles of geometry and natural philosophy; three full years of study under the direction of some respectable physician or physicians whose practice he must have attended. During this time he must have read the most approved authors in anatomy, physiology, chemistry, materia medica, surgery, and the theory and practice of physic. He was examined in physiology, pathology, therapeutics, and surgery.

There was still no obligation on the part of any practitioner to present himself for license; and the only privilege enjoyed by the licensed physician, apart from the right to attend the meetings of the Society and the use of its libraries, was exemption from service in the militia.

Notwithstanding the Act of 1803 made it possible for every properly qualified physician to become licensed and a member of the Society, it proved necessary to take further steps to bring them within the fold, and in 1806 a by-law was passed in the following terms:

¹ Proceedings Massachusetts Medical Society, 1831, 26.

"To promote the laudable design of the Legislature, in forming and incorporating this Society, to prevent as far as may be all unqualified persons from practising medicine or surgery, and in order to discourage empiricism and quackery: it shall be deemed disreputable and shall be unlawful, for any fellow of this Society, in the capacity of physician or surgeon to advise or consult with any person, who having been a fellow of the Society, shall be expelled therefrom, or with any person whatever, who shall thereafter commence the practice of medicine or surgery within this Commonwealth, until he shall have been duly examined and approbated by the censors of the Society or by those of some district society," etc.

The object of this by-law was to guard the public against ignorant, designing, and unscrupulous pretenders. The Society had provided the means by which physicians could give evidence of having followed a suitable course of study, and it was its duty to inform the public that if it employed unlicensed practitioners it must suffer the consequences.

Despite these attempts at compelling practitioners to become educated physicians, the standard was evidently too high for all to attain. Many could not comply with the requirements; others did not find a sufficient inducement in the honors and privileges bestowed by the Society. The Thomsonians, then beginning their career, required no education and no license. There was no law to prevent their entering practice; and Chief Justice Parsons¹ had then made his famous decision in the case of the Commonwealth v. Thomson, "that if the prisoner acted with an honest intention and expectation of curing the deceased by this treatment, although death, unexpected by him, was the consequence, he was not guilty of manslaughter. . . . There is no law which prohibits any man from prescribing for a sick person with his consent if he honestly intends to cure him by his prescription; and it is not felony, if through his ignorance of the quality of the medicine prescribed or of the nature of the disease or of both, the patient, contrary to his expectation, should die."

The Chief Justice evidently felt that there was likely to be need of some legislation which should prevent the occurrence of such cases, for he closes his decision by saying:² "It is to be exceedingly lamented that people are so easily persuaded to put confidence in these itinerant quacks, and to trust their lives to strangers without

¹ Massachusetts Reports, 1809, vi. 134.

² Op. cit., p. 142.

knowledge or experience. If this astonishing infatuation should continue, and men are found to yield to the impudent pretensions of ignorant empiricism, there seems to be no adequate remedy by a criminal prosecution, without the interference of the legislature, if the quack, however weak and presumptuous, should prescribe with honest intentions and expectations of relieving his patients."

In 1811 an unsuccessful attempt was made to incorporate a rival society with the same privileges as those enjoyed by the Massachusetts Medical Society, under the title of the Massachusetts College of Physicians. The announced reason was that two societies were better than one; the real object was thought to be the establishment of a new medical school. The Massachusetts Medical Society strongly opposed the scheme, on the ground that it was unnecessary and would lead to the rejected candidates of the one society being accepted by the other, whatever might be their qualification, thus producing disagreements and animosities injurious to the profession and to the public.¹

It is possible that in consequence of the recommendation of Chief Justice Parsons, certainly with the view of discouraging quackery, which was rapidly increasing under the influence of Thomson, the legislature in 1818 passed its first "Act regulating the Practice of Physick and Surgery," which was supplemented in 1819 by "an Act in addition to an Act entitled 'an Act regulating the Practice of Physick and Surgery.'"

According to the first of these Acts, no person entering the practice of physic and surgery within the State could recover by law any debt or fees for his professional services unless he had received a medical degree from some college or university, or had been duly licensed by some medical society or college of physicians, or by three Fellows of the Massachusetts Medical Society, designated in each county by its councillors, with power to examine candidates and grant licenses. Copies of these licenses were to be deposited with the clerk of the town, district, or plantation in which the licentiate resided.

In the Act of 1819, that the physician might recover his debts by law, it was necessary that he should be a licentiate of the Society

¹ Dr. S. A. Green, *loc. cit.*, p. 651.

or a medical graduate of Harvard. If the candidate for the license was educated out of the State, the censors might waive a new examination if they were satisfied that he had received an education agreeably to the regulations provided by the Society.

It is stated¹ that this difficult trust was accepted with reluctance,² that the law was not sought for by the Society, and that it was doubtful whether its action was not rather injurious than beneficial. Of this law Chief Justice Shaw said :³

"It appears to us that the leading and sole purpose of this act was to guard the public against ignorance, negligence, and carelessness in the members of one of the most useful professions, and that the means were intended to be adapted to that object. If the power of licensing were given to the Medical Society exclusively, there would be much more plausible ground, at least, to maintain that the power was conferred on a body who would have a temptation to abuse it, so as to promote their private interests; but where the power is conferred equally on the university charged with the great interests both of general and professional education, and which cannot be perceived to have any such interest, that ground of argument seems to be wholly removed, and it seems difficult to perceive how a power which it is important to the community should be placed somewhere could be placed more safely. The courts are all of the opinion that the law in question is not repugnant to the Article of the Bill of Rights, above cited, and that its validity cannot be impeached on the ground that it is a violation of any principle of the constitution."

The licensing of physicians by the Society doubtless aided in restraining a certain number of practitioners from adopting some of the methods of the charlatan; but it did not interfere with the encouragement of the latter by the community. I am indebted to Dr. John Homans, 2d, for the opportunity of quoting from a letter of Dr. George C. Shattuck to Dr. Homans, written July 26, 1828. It gives evidence of the fondness for quackery in Boston at that time.

"The city has 60,000 (inhabitants?) and seventy-one regularly bred physicians. About one-half, from either youth or age, have not much to do. The irregular physicians are numerous, at the head of which, in popular influence, we may place Thomson, who has formed his botanical society, who have individually learned his system of practice by hot drops and sweating, etc. The disciples of this system, perhaps, may embrace one-

¹ Proceedings Massachusetts Medical Society, 1840, p. 68.

² Loc. cit., 1831, 10.

³ *Hewitt v. Charier, Jr.*, 16 Pick., 355.

sixth of the population of Boston. The patent medicines are employed in about, I believe, another sixth of the cases."

In 1831 the Society had reached such a degree of success in carrying out the objects of its incorporation that it included in its ranks "nearly every educated practitioner of medicine or surgery in the State."¹

The line of distinction was so strongly drawn between its members and irregular practitioners "that the profession is no longer made responsible in the minds of men for the consequences of their ignorance and malpractice, nor its harmony disturbed by their misconduct; and they are much less successful than formerly in diverting the confidence of the community from regular physicians to themselves."²

At this time, however, there were certain discordant elements within the Society which threatened its prosperity and usefulness. Some of the younger physicians were dissatisfied with the clause in the act of 1803, which demanded a period of three years of probation in practice before admission to full membership in the Society. The legislature was therefore requested to repeal this clause, which it did by a special act in 1831, and approved candidates became at once Fellows of the Society.

A more serious disturbance, which menaced the harmony and influence of the Society at this time, was the appeal to the legislature from the physicians of Berkshire county, in the western part of the State. They desired to be incorporated as an independent body, nominally on account of their distance from the headquarters of the Society, their limited privileges, and their dissatisfaction with the requirements of the censors. It was supposed that this action was largely planned in the interests of the Berkshire Medical Institution, a medical school incorporated in 1823, but without the authority to confer the degree of Doctor of Medicine.³ It was situated in Pittsfield, and was practically a department of Williams College (not far distant), which had the power to confer degrees, but no medical faculty or medical school. Williams College sanctioned the degree of the candidates educated at the Berkshire Medical Institution. The conditions of this alliance proved im-

¹ Proceedings Massachusetts Medical Society, 1831, 18.

² Loc. cit., 1831, 19.

³ Loc. cit., 1836, 25.

portant in the courts¹ when the honorary degree of M.D. from Williams College was offered in evidence as a legal qualification. It was decided that it was invalid, since the defendant must have both the education and the degree to be a legally qualified practitioner.

In the year following the incorporation of the Berkshire Institution it had petitioned the legislature to be granted the same privileges as belonged to the medical graduates of Harvard University, the most important of which was that of being acknowledged and received by the Massachusetts Medical Society without examination as regular practitioners of medicine and surgery. At that time this petition was successfully opposed, on the ground that the Berkshire Institution had no independent board of overseers like Harvard College, and therefore was not under the same restrictions and oversight. The petition to form an independent society was also successfully opposed; but in 1837, with the approval of the Society, an act was passed, according to which graduates of the Berkshire Medical Institution were "entitled to all the rights, privileges, and immunities granted to the medical graduates of Harvard College."

The rights and privileges of the licentiates of the Massachusetts Medical Society had been somewhat extended by the Anatomical Law of 1834, according to which "the dead bodies of such persons as it may be required to bury at the public expense might be surrendered to any regular physician duly licensed according to the laws of this Commonwealth."

The State had thus definitely committed itself to the regulation of the practice of medicine by the acts of 1818 and 1819, and had placed the duty of licensing practitioners in the hands of the Massachusetts Medical Society. It conferred but few privileges on the licensed, namely, exemption from militia service and jury duty, the right to obtain and dissect the unclaimed bodies of those to be buried at the public expense, and to collect fees by law. But unlicensed physicians could take their pay in advance, and were not desirous of the privilege of consulting with the members of the Society. The Thomsonian movement was rapidly spreading throughout the country, appealing to the people by its simplicity

¹ Wright v. Lanckton, 19 Pick., 291.

and economy, its dogmatic assertions and reports of wonderful cures, its advocacy of vegetable remedies, and its cry of persecution.

The efforts of the Society to include within its ranks all educated practitioners, led in 1836 to the recognition of dentists as practitioners of medicine, since dental surgery was being studied and pursued scientifically by gentlemen of regular medical education.¹

In the following year a further attempt was made in this direction by requiring that every licentiate or medical graduate of Harvard or Berkshire entitled to admission to the Society must enter within a year after being so entitled or be deemed an irregular practitioner. This term was applied to all practitioners in the State who were not fellows or licentiates of the Society, or doctors in medicine of Harvard or Berkshire. The above regulation was repealed three years later, since it took away "the freedom originally intended to be allowed to all regular physicians to join the Society or not, as they pleased," and stigmatized "as irregular practitioners gentlemen who have been recognized as competent physicians merely for the exercise of this freedom."²

In 1836, the Statutes of the Commonwealth were revised, and the report of the commissioners (1835, Part I., 125) includes all the legislation previously enacted, placing the control of the licensing of physicians in the power of the Society. But the Legislature did not accept the first section, which read as follows :

"No person who has commenced the practice of physic or surgery, since the year one thousand eight hundred and eighteen, or who shall hereafter commence the practice thereof, shall be entitled to maintain any action for the recovery of any debt or fee accruing for his professional services, unless he shall, previously to rendering these services, have been licensed by the officers of the Massachusetts Medical Society, as hereafter provided, or shall have been graduated a doctor in medicine in Harvard University, or in the Berkshire Medical Institution, by the authority of Williams College."

It also negatived a clause making the neglect to record a license a like disqualification to its non-possession. The Legislature approved this part of the report of the committee with the above exceptions, and it became Chapter 22 of the Revised Statutes entitled "Regulations Concerning the Practice of Physic and Sur-

¹ Proceedings of the Massachusetts Medical Society, 1836, 116.

² Ibid., 1840, 72.

gery." According to Dr. J. Mason Warren,¹ the first section was omitted in accordance with the wishes of the greater part of the (State Medical) Society . . . as being in its action adverse to their interests. It served merely to excite sympathy, especially for the Thomsonians, and could not prevent them from receiving fees for services rendered.

The Society continued in its work of licensing physicians without apparent disturbance until 1848. At this time its effect in controlling the conditions of medical practice in the State is thus expressed by Dr. A. L. Peirson, of Salem, in behalf of a committee of which he was chairman:²

"We have steadily elevated our profession, by improving medical education, encouraging the harmony and honorable intercourse of its members, and have protected from the mischief of quackery, by discouraging every show of it among regular practitioners. This simple and efficient plan of the Society has accomplished all that was ever intended by its organization in 1803. . . . It is to be regretted that from natural causes, no way to be attributed to the form of organization, the concentrated action of the Society has not been equally felt in all parts of this extended Commonwealth."

According to Dr. Z. B. Adams,³ there were at this time 1237 medical practitioners in Massachusetts, most of whom belonged to the Massachusetts Medical Society.

On the contrary, Dr. J. V. C. Smith presented the minority report of the same committee, in which he states:⁴

"The Society was once eminently useful in protecting the community from the encroachment of ignorant pretenders, . . . and it must be obvious to all that circumstances have greatly changed, our legislative tables have been completely turned, and will probably ever remain so. A license, or medical degree, is no longer requisite for the practice of medicine in Massachusetts, and no laws of the State, or of the Massachusetts Medical Society, are of any avail in guarding the entrance into the profession, or regulating the conduct of its members. . . . Less than one-half of the regular practitioners of medicine now nominally constitute the Society. In Berkshire, there are one hundred; less than twenty belong to the Society. In Hampden, one hundred and thirty (about); and of this number only

¹ Transactions of the Medical Society of the State of New York, 1844, 1845, 1846, vi. app. 40.

² Proceedings of the Massachusetts Medical Society, 1848, 142.

³ Transactions of the American Medical Association, 1848, i. 366.

⁴ Proceedings of the Massachusetts Medical Society, 1848, 150.

about twenty or twenty-five are members of the State Society. In some other counties there is doubtless a majority, while in others not one-half of the regular physicians are members. The number of Fellows of the Massachusetts Medical Society is not far from seven hundred, which is not probably one-half of the physicians in the State."

These reports were called forth by a resolution presented by Dr. Childs, of Pittsfield, involving a change in the organization of the Society for the purpose of advancing medical science, promoting harmony and good feeling in the profession, thereby contributing to the best interests of society.

Although the councillors largely favored the views expressed in the majority report, the existence of a considerable degree of dissatisfaction and the necessity of remedying it was apparent in the appointment of a committee to consider the question of altering the by-laws. This committee consisted of Drs. John Ware, A. L. Peirson, W. Lewis, J. Jeffries, J. V. C. Smith, H. H. Childs, and John C. Dalton. The report of this committee is especially valuable from the character of the latter and the recognition of the necessity of the Society to increase and consolidate its strength. They stated¹ that many members had often expressed the opinion that the society as constituted did not accomplish all of the purposes of which it was capable—and failed to secure the favor of the profession in remote parts of the State. Consequently only a limited number of physicians found it for their interest to become members. They were called upon to obey laws which they had no voice in making, and to contribute to the expenses of an organization in which they found it difficult to take part. The Society is but little known to those among whom they are thrown, thus has but little influence over them, and it is not necessary to their reputable standing among physicians nor to their success with the community that they should be connected with it.

The committee reported various amendments to the by-laws involving favorable action of the Legislature which took place in 1850. By-law V. permitted any reputable practitioner of medicine or surgery who had been in practice not less than fifteen years, to be admitted a Fellow, previously to 1852, by the District Society where he resides, by a vote of two-thirds of the members present at any stated meeting.

¹ Ibid., 155.

The Society was thus endeavoring to increase its influence in the one direction by licensing as many educated and intelligent physicians as possible, and even without examination in certain instances. This liberality, however, was to be controlled by what many now see to have been an unwise policy, namely, the treatment of the homœopathists.

In 1846,¹ an applicant for membership stated that he had great confidence in the efficacy of medicine "especially when prepared and prescribed agreeably to the directions of Hahneman." The councillors referred the application to the censors, with full powers to settle the matter, and they admitted the applicant to membership.

In the meantime the influence of homœopathy was increasing, and in 1850² it was moved "that all homœopathic practitioners are, or should be, denominated irregular practitioners, and, according to the By-Laws of this Society, made and provided, ought to be expelled from membership." This resolve was tabled on motion of Dr. Bigelow.

At the next meeting Drs. Hayward, O. W. Holmes, and J. B. S. Jackson were appointed a committee "to devise some course of action, to be pursued by the Society, in regard to all homœopathists." This committee reported as follows:³

"(1) *Resolved*, That any Fellow of this Society who makes application to resign his Fellowship in consequence of having adopted the principles and practice of homœopathy may be permitted to do so on paying his arrearages; but he shall not be entitled to any of the privileges of Fellowship, nor shall his name be retained in the List of Fellows.

"(2) *Resolved*, That a diploma from a homœopathic institution shall not be received as any evidence of a medical education; nor shall the Censors of the Society regard the attendance on the lectures of such institutions, nor the time passed at them, as qualifications which shall entitle candidates to an examination for a license from this Society."

This report was adopted. Three years later the question of homœopathy was again brought before the Society at the annual meeting.⁴ The Essex North District Society there presented the following resolution:

"Forasmuch as there is no common ground of support or sympathy between homœopathy and allopathy;

¹ Loc. cit., 1846, 108.

² Loc. cit., 1850, 51.

³ Proceedings Massachusetts Medical Society, 1850, 82.

⁴ Loc. cit., 1853, 102.

Resolved, That if the homœopaths are allowed to retain their regular standing in the Massachusetts Medical Society, and claim fellowship and counsel with allopaths, we, as consistent and conscientious individuals, request to be honorably discharged from our allegiance and connection with the parent Society."

Dr. Spofford presented the following resolution :

"That, while we recognize the right of regular physicians to use medicine in any quantity or doses which they may consider useful to their patients, we consider all use of the name of homœopathy in public papers, on signs or otherwise, as quackish and disreputable, and that all persons who make pretensions to homœopathic practice ought to be excluded from the Society."

These resolutions, together with the whole subject, were referred to the councillors, who appointed the following committee to report upon them: Drs. Bigelow, Metcalf, M. Wyman, Spofford, and Alden. Dr. Jacob Bigelow reported in February, 1854, and his report was laid on the table.

In the next year¹ the censors of the Suffolk District Society rejected a candidate for admission who avowed himself practising upon the principles styled homœopathy, on the ground that he was not "fitted for the practice of medicine." It was voted (February 7, 1855), on motion of Dr. Bowditch, "that the councillors approve of the course adopted by the censors of the Massachusetts Medical Society for Suffolk District."

In the following June this district society called the attention of the general society to defects in the By-laws concerning the expulsion of members, with reference to a remedy; and this question, together with that concerning the admission of members, was referred to a committee for a report. A few days later the latter reported. Their report was referred to the councillors for adoption. They, in turn, referred the report to a committee, which altered the recommendations; these were adopted by the councillors in February, 1856, and by the Society on May 29, 1856.

These alterations made it possible to expel a member for any breach of the By-laws, for which censure, expulsion, or deprivation of privilege was a penalty, and for any conduct unbecoming and unworthy an honorable physician and member of the Society, in addition to causes hitherto deemed sufficient. A carefully

¹ Loc. cit., 1855, 7.

arranged method of conducting trials for offences was also provided. The report of the committee of the councillors recommending these alterations stated that they had no definite measures to offer with regard to homœopathy, and submitted the subject to the judgment of the councillors. This part of the report was laid on the table without debate.¹

June 3, 1856, four days after the adoption of the amended report by the Society, the Homœopathic Medical Society was incorporated by the Legislature. It was authorized to examine all candidates for membership, and, if qualified, give them the approbation of the Society. Its members were declared exempt from militia service.

In the following year the motion that all candidates for the Fellowship be examined by the censors was referred to a committee, reported upon favorably, and the Legislature passed a special act March 5, 1859, making this method the law.

At this time the revision of the statutes was again under consideration, and the Commissioners had made their report to the Legislature, in which the existing laws concerning the regulation of the practice of medicine were included. This report was referred to a joint committee, which was subdivided into special committees. The general committee referred the chapter concerning the regulation of medical practice to one of these special committees on May 16, 1859. It instructed this committee—

“by special order, to inquire into the expediency of omitting all that part of the chapter relating to the Massachusetts Medical Society and to the regulation of the practice of medicine; and on the 21st of May they reported to the general committee amendments striking out every section, and every line, and every word in that chapter which gave the Massachusetts Medical Society any power to examine or license physicians or surgeons, or to prescribe a course of study and qualifications for physicians or surgeons.”²

Four days later the councillors appointed a committee consisting of Drs. J. Bigelow, A. A. Gould, J. Jeffries, G. C. Shattuck, H. J. Bigelow, H. H. Childs, and J. G. Metcalf, and “instructed them to look after the interests of the Society in the Legislature,” and

¹ Loc. cit., 1856, 35.

² Argument of J. H. Benton, Jr., before the Committee on Public Health, 1885.

they were "authorized to take such measure to protect their interests as they may deem expedient."¹

But, in the words of Mr. Benton—

"The general committee adopted these proposed amendments, with the addition of a change of title of the act from 'Regulations concerning the practice of physic and surgery' to 'of the promotion of anatomical science,' and that chapter now stands, with the same title as Chapter 81 of the Public Statutes. All the amendments were adopted by the Legislature, and were enacted December 28, 1859. . . . The Legislature then deliberately took out of the law of the Commonwealth every provision for the regulation of the practice of medicine or surgery, or for the examination or qualification of physicians or surgeons."

The committee of the Society appointed to look after its interests in the Legislature recommended, October 5, 1859, that "no person shall hereafter be admitted a member of the Society who professes to cure diseases by spiritualism, homœopathy, or Thomsonianism," which was adopted. As evidence of the state of feeling at the time, it may be said that at the meeting at which this resolution was approved it was voted that the Society disclaim all responsibility for the sentiments contained in the annual address of the day previous. This had been delivered by Oliver Wendell Holmes, and was entitled "Currents and Counter-currents of Medical Science."

Thus we see that the Massachusetts Medical Society was organized in 1781 with the express purpose of making a just discrimination between duly educated and properly qualified practitioners and those who ignorantly and wickedly administer medicine. For many years its Fellows acted most judiciously in endeavoring to include within their number every educated and moral practitioner in the State. They accomplished this largely by the force of example, association, and united encouragement. The State made them the sole source of licenses to practise. The progress of Thomsonianism left their responsibilities essentially intact. The advent of homœopathy found them weak where they should have been strong—short-sighted where they should have been far-seeing. The leaders were obliged to follow, and the reproof of the censors prevailed against the wisdom of the councillors.

¹ Proceedings Massachusetts Medical Society, 1859, 112.

Homœopathic diplomas and homœopathic certificates are now accepted by the Society. Homœopathic physicians have been found fitted to practise by the great public, which decides this question for all. Ten years of increasing intolerance destroyed seventy years of enthusiastic effort, devoted labor, tactful management, and wise counsel in the public interest. The State revoked the control of medical practice, and the people have been the sufferers. The history of Massachusetts in this respect is the history of the country. She was one of the last of the States to lay down the control, and she will be one of the last to resume it.

Thanking you for the patience with which you have listened to an historical narrative which offers but little in the way of moral or example to our own Association, we will proceed to the business of the day.

